



**DEPARTMENT OF PUBLIC SAFETY
LICENSING & INSPECTION UNIT
164 STATE HOUSE STATION
AUGUSTA, ME 04333-0164**

Telephone: (207) 624-7222 or 7221

Fax: (207) 287-3424

DEPARTMENT USE ONLY

License No. Assigned:

Class:

Deposit Date:

Amt. Deposited:

By:

PRESENT LICENSE EXPIRES _____

APPLICATION FOR CERTIFICATE OF APPROVAL

- ☐ Certificate of Approval – Malt Liquor \$600.00
☐ Certificate of Approval – Table Wine \$600.00
☐ Certificate of Approval – Table Wine (120 gallons or less per year) \$100.00

Check Payable: Treasurer State of Maine

The undersigned hereby applies for a certificate of approval for selling, transporting and shipping into the State of Maine liquors to the Maine wholesale licensees in accordance with the provisions of **Title 28-A, section 1361, MRS** as amended.

ALL QUESTIONS MUST BE ANSWERED IN FULL

1. Applicants: _____

PRINT CLEARLY – EXACT LEGAL ENTITY

2. D.B.A: _____

3. Telephone Number: _____ Fax Number: _____

4. Business Street Address: _____

5. Federal I.D. #: _____

6. List all corporate officers or partners, if a partnership:

PRINT CLEARLY

NAME:

DOB

7. If a corporation is any officer, director, or stockholders of said corporation in any way interested, directly or indirectly as a director or stockholder, in any other corporation, which is the holder of a wholesale license for the sale of liquors, granted by the State of Maine? _____ MALT _____ WINE

8. Is the applicant directly or indirectly giving aid or assistance in the form of money, property, credit (other than the usual commercial credit), or financial assistance of any sort, to any person, association, or corporation holding a liquor license granted by the State of Maine? _____ YES _____ NO

9. Each holder of a certificate of approval shall file with his application a list giving the name and address of each bottler and wholesaler dealer authorized to distribute products of that certificate holder and designating the exclusive territory assigned to each wholesaler within the State. Wholesalers shall not sell those products to licensees outside of the exclusive territory so allocated and designated, unless previously authorized by the department.

NAME

ADDRESS

PRINT CLEARLY

ATTACH A DISTRIBUTOR TERRITORY FORM AND /OR ADDITIONAL INFORMATION OUTLINING THE EXCLUSIVE TERRITORIES FOR EACH WHOLESALER AND PRODUCTS OR BRAND THEY MAY DISTRIBUTE WITHIN THE AREA.

Documentation of primary source must be included with this application for every brand registered.

Application must be accompanied by label registration application or, if renewal, a re-registration of each label is required.

10. It is unlawful for any wholesale licensee to purchase alcoholic beverages from other than the primary source of supply within the United States. "Primary source of supply" means the distillers, the bottler, the brewer, the brand owner or designated agent of any distiller, brewer or brand owner.

11. Do you intend to maintain special in-state storage warehouse facilities? _____ YES _____ NO

If answer is yes, please check the appropriate space, complete the following section and enclose required additional fee.

_____ Certificate of Approval for in-state storage warehouse, **Malt Only**-----\$600.00

_____ Certificate of Approval for in-state storage warehouse, **Table Wine** -----\$600.00

_____ Certificate of Approval for in-state storage warehouse, **Spirituos Only**-----\$600.00

12. Address of Maine warehouse:

Street: _____ **City/Town:** _____ **Zip Code:** _____

Telephone Number: _____ **Fax Number:** _____

Name of manager or person in charge: _____

Print Clearly

Dated at: _____ **on Month/Day** _____ **20** _____

Signature(s) or Applicant(s) or Corporate Officer

Print Name

Signature(s) or Applicant(s) or Corporate Officer

Print Name

